

## **Evaluation of Serum IL 6 and H. pylori in FMF patients treated with colchicine and comparison with patients Without treatment and control group.**

### **BACKGROUND:**

Familial Mediterranean Fever (FMF) is an inherited multisystem disease manifested by recurrent painful attacks affecting the abdomen, chest or joints, often accompanied by fever and sometimes a skin rash.

**AIM:** To evaluate, if there is a significant relation between H. pylori infection and Familial Mediterranean Fever and if H. pylori has an effect on the frequency of Familial Mediterranean Fever attacks.

### **METHODS:**

40 Familial Mediterranean Fever patients (20 patients who were taking colchicine and 20 patients had discontinued treatment for any reason) and 20 healthy controls were included. subjects were tested for H. pylori infection (IgA and IgG). Levels of acute phase determinants and attack frequency were determined in both H. pylori-positive and H. pylori-negative groups.

### **RESULTS:**

Interleukin-6 (IL-6), erythrocyte sedimentation rate (ESR), C-reactive protein (CRP) in patients who had discontinued medication were significantly different from those in the other patients or the controls ( $P > 0.05$ ). There was not a significant difference between the H. pylori prevalence and urine protein among groups, but H. pylori-positive patients have a higher frequency of attacks when compared to H. pylori-negative patients ( $p < 0.05$ ). In FMF patients with H. pylori-positive test results serum levels of IL6 was significantly more than the group of patients with FMF who were negative for Helicobacter Pylori ( $p < 0.05$ ).

### **CONCLUSION:**

Discontinuation of FMF treatment increase the Levels of inflammatory mediators. Infection with H. pylori increases the risk of a relapse.

**Key Words:** FMF – Colchicine -IL-6 -ESR-CRP- H. pylori